

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000070465

Entity Name: EL CHAPARRO, INC.

FILED
Dec 02, 2004
Secretary of State

Current Principal Place of Business:

6667 LAKEWORTH ROAD
LAKE WORTH, FL 334671507

New Principal Place of Business:

Current Mailing Address:

6667 LAKEWORTH ROAD
LAKE WORTH, FL 334671507

New Mailing Address:

FEI Number: 65-0940539 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, EVA G
6667 LAKEWORTH ROAD
LAKE WORTH, FL 334671507 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GONZALEZ, EVA G
Address: 6667 LAKEWORTH ROAD
City-St-Zip: LAKE WORTH, FL 334671507

Title: D (X) Delete
Name: GONZALEZ, JOSEPH
Address: 6667 LAKEWORTH ROAD
City-St-Zip: LAKE WORTH, FL 334671507

Title: DVP () Delete
Name: GONZALEZ, JOSE
Address: 6667 LAKEWORTH ROAD
City-St-Zip: LAKE WORTH, FL 334671507

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EVA GONZALEZ

DP

12/02/2004

Electronic Signature of Signing Officer or Director

Date